

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	U.C		3-11-01
O.I.P.E. CLASSIFIER		48	4/2/01
FORMALITY REVIEW	-JFZ 18	857 906	04-18-01 07/03/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1 ✓ > ✓	
2 ÷ ✓	
3	
4 ÷ N	
5 N	
6 N	
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Claim	Date
Final Original	
51 ✓ - N	
52 - N	
53 ÷ N	
54 ÷ N	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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